

Superload Permit Application
Virginia Department of Motor Vehicles

HP-402 (1/7/04)

All requests should be made at least 10 working days prior to desired movement date. Configurations that exceed any of the following dimensions: 16 feet in width, 16 feet in height or 151,000 pounds, are required to submit a valid certificate or letter of insurance from the issuing agent or agency. Insurance shall be valid throughout the duration of the move and coverage shall be \$500,000 or more.

Applicant/Company: _____ Federal I.D. Number/SSN: _____

Address: _____ Phone: (): _____

City _____ State _____ Zip _____ Fax: (): _____

Contact Person: _____ Permit Agent: _____

1. Item to be moved: _____ Hazardous material? ☐ Yes ☐ No (*check one*)

2. Item will be: ☐ Hauled ☐ Towed ☐ Driven (*check one*)

Commodity Information			Overall Dimensions (including transport vehicle)			
	Feet	Inches		Feet	Inches	
Height			Height			
Width			Width			
Length			Length			
			R. Overhang			
			F. Overhang			
Weight (lbs)			Gross Weight (lbs)			

3. **Origin of Move** (closest intersecting/routes/county): _____

4. **Destination** (closest intersecting routes/county): _____

5. Requested routes of travel: _____

6. Requested movement date: _____ Vehicle Trailer Serial # or License #: _____

7. Individual axle weight and spacing:

	Weight (lbs.)		Spacing between Axles		
Axle #			Axle #	Feet	Inches
Axle 1			1 to 2		
Axle 2			2 to 3		
Axle 3			3 to 4		
Axle 4			4 to 5		
Axle 5			5 to 6		
Axle 6			6 to 7		
Axle 7			7 to 8		
Axle 8			8 to 9		
Axle 9			9 to 10		
Axle 10			10 to 11		
Axle 11					
Totals					

Failure to provide any of the information listed above could result in denial of your request.

Print your name: _____ Signature: _____

Date: _____